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PTO/SB/05 (03-01)

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UTILITY PATENT APPLICATION TRANSMITTAL (Only for new nonprovisional applications under 37 CFR 1.53(b))		Attorney Docket No.	03/034 MFE
		First Inventor	Herbert PEIFFER
		Title	Coextrudierte, heißsiegelbare und peelfähige Polyesterfolie, mit starker Peelbarkeit, ...
		Express Mail Label No.	EV 310839910 US



APPLICATION ELEMENTS See MPEP chapter 600 concerning utility patent application contents.		ADDRESS TO: Commissioner for Patents Mail Stop Patent Application P.O. Box 1450 Alexandria VA 22314-1450	
1. <input checked="" type="checkbox"/> Fee Transmittal Form (e.g., PTO/SB/17) (Submit an original and a duplicate for fee processing)		7. <input type="checkbox"/> CD-ROM or CD-R in duplicate, large table or Computer Program (Appendix)	
2. <input type="checkbox"/> Applicant claims small entity status. See 37 CFR 1.27.		8. Nucleotide and/or Amino Acid Sequence Submission (if applicable, all necessary)	
3. <input checked="" type="checkbox"/> Specification (preferred arrangement set forth below) <ul style="list-style-type: none"> - Descriptive title of the invention - Cross Reference to Related Applications - Statement Regarding Fed sponsored R & D - Reference to sequence listing, a table, or a computer program listing appendix - Background of the Invention - Brief Summary of the Invention - Brief Description of the Drawings (if filed) - Detailed Description - Claim(s) - Abstract of the Disclosure 		a. <input type="checkbox"/> Computer Readable Form (CRF)	
4. <input checked="" type="checkbox"/> Drawing(s) (35 U.S.C. 113) [Total Sheets 3]		b. Specification Sequence Listing on: <ul style="list-style-type: none"> i. <input type="checkbox"/> CD-ROM or CD-R (2 copies); or ii. <input type="checkbox"/> paper 	
5. Oath or Declaration [Total Sheets]		c. <input type="checkbox"/> Statements verifying identity of above copies	
a. <input type="checkbox"/> Newly executed (original or copy)		9. <input type="checkbox"/> Assignment Papers (cover sheet & document(s))	
b. <input type="checkbox"/> Copy from a prior application (37 CFR 1.63 (d)) (for continuation/divisional with Box 18 completed) <ul style="list-style-type: none"> i. <input type="checkbox"/> DELETION OF INVENTOR(S) Signed statement attached deleting inventor(s) named in the prior application, see 37 CFR 1.63(d)(2) and 1.33(b). 		10. <input type="checkbox"/> 37 CFR 3.73(b) Statement (when there is an assignee) <input type="checkbox"/> Power of Attorney	
6. <input type="checkbox"/> Application Data Sheet. See 37 CFR 1.76		11. <input type="checkbox"/> English Translation Document (if applicable)	
		12. <input type="checkbox"/> Information Disclosure Statement (IDS)/PTO-1449 <input type="checkbox"/> Copies of IDS Citations	
		13. <input type="checkbox"/> Preliminary Amendment	
		14. <input checked="" type="checkbox"/> Return Receipt Postcard (MPEP 503) (Should be specifically itemized)	
		15. <input type="checkbox"/> Certified Copy of Priority Document(s) (if foreign priority is claimed)	
		16. <input type="checkbox"/> Nonpublication Request under 35 U.S.C. 122 (b)(2)(B)(i). Applicant must attach form PTO/SB/35 or its equivalent.	
		17. <input checked="" type="checkbox"/> Other: Limited Recognition Form;	

18 If a CONTINUING APPLICATION, check appropriate box, and supply the requisite information below and in a preliminary amendment, or in an Application Data Sheet under 37 CFR 1.76:

Continuation Divisional Continuation-in-part (CIP) of prior application No.: _____

Prior application information: Examiner _____ Group Art Unit: _____

For CONTINUATION or DIVISIONAL APPS only: The entire disclosure of the prior application, from which an oath or declaration is supplied under Box 5b, is considered a part of the disclosure of the accompanying continuation or divisional application and is hereby incorporated by reference. The incorporation can only be relied upon when a portion has been inadvertently omitted from the submitted application parts.

19. CORRESPONDENCE ADDRESS

<input checked="" type="checkbox"/> Customer Number or Bar Code Label	000038263		or	<input checked="" type="checkbox"/> Correspondence address below
Name	ProPat, L.L.C.			
Address	2912 Crosby Road			
City	Charlotte	State	North Carolina	Zip Code
Country	USA	Telephone	(704) 365-4881	Fax
Name (Print/type)	Klaus Schweitzer		Registration No. (Attorney/Agent)	Limited Recognition
Signature			Date	August 21, 2003

Burden Hour Statement: This form is estimated to take 0.2 hours to complete. Time will vary depending upon the needs of the individual case. Any comments on the amount of time you are required to complete this form should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, Washington, DC 20231. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Mail Stop Patent Application, Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450

1791 U.S. PTO
08/21/03

FEE TRANSMITTAL for FY 2002

Effective 01/01/2003. Patent fees are subject to annual revision.

 Applicant Claims small entity status. See 37 CFR 1.27

TOTAL AMOUNT OF PAYMENT (\$ 880.00)

METHOD OF PAYMENT (check all that apply)

 Check Credit card Money Order Other None
 Deposit Account

Deposit Account Number

50-2193

Deposit Account Name

ProPat, L.L.C.

The Commissioner is authorized to: (check all that apply)

 Charge fee(s) indicated below Credit any overpayments Charge any additional fee(s) during the pendency of this application Charge fee(s) indicated below, except for the filing fee to the above-identified deposit account.

FEE CALCULATION

1. BASIC FILING FEE

Large Entity	Small Entity	Fee Description	Fee Paid
Fee Code	Fee (\$)	Fee Code	Fee (\$)
1001	750	2001	375
1002	330	2002	165
1003	520	2003	260
1004	750	2004	375
1005	160	2005	80
SUBTOTAL (1)		(\$ 750.00)	

2. EXTRA CLAIM FEES FOR UTILITY AND REISSUE

Total Claims	Independent Claims	Extra Claims	Fee from below	Fee Paid
		-20**=	X	= -0-
		-3**=	X	= -0-

Multiple Dependent

Large Entity	Small Entity	Fee Description
Fee Code	Fee (\$)	Fee Description
1202	18	2202 9 Claims in excess of 20
1201	84	2201 42 Independent claims in excess of 3
1203	280	2203 140 Multiple dependent claim, if not paid
1204	84	2204 42 **Reissue independent claims over original patent
1205	18	2205 9 **Reissue claims in excess of 20 and over original patent
SUBTOTAL (2)		(\$ -0-)

** or number previously paid, if greater; For Reissues, see above

Complete if Known	
Application Number	
Filing Date	
First Named Inventor	Herbert PEIFFER
Examiner Name	
Group Art Unit	
Attorney Docket No.	03/034 MFE

FEE CALCULATION (continued)

3. ADDITIONAL FEES

Large Entity	Small Entity	Fee Paid
Fee	Fee	Fee
1051	130	2051 65 Surcharge – late filing fee or oath
1051	50	2052 25 Surcharge – late provisional filing fee or cover sheet
1053	130	1053 130 Non-English specification
1812	2,520	1812 2,520 For filing a request for ex parte reexamination
1804	920	1804 920 Requesting publication of SIR prior to Examiner action
1805	1,840	1805 1,840 Requesting publication of SIR after Examiner action
1251	110	1251 55 Extension for reply within first month
1252	410	1252 205 Extension for reply within second month
1253	930	1253 465 Extension for reply within third month
1254	1,450	1254 725 Extension for reply within fourth month
1255	1,970	1255 985 Extension for reply within fifth month
1401	320	1401 160 Notice of Appeal
1402	320	1402 160 Filing a brief in support of an appeal
1403	280	1403 140 Request for oral hearing
1451	1,510	1451 1,510 Petition to institute a public use proceeding
1452	110	2452 55 Petition to revive – unavoidable
1453	1,300	2453 650 Petition to revive – unintentional
1501	1,300	2501 650 Utility issue fee (or reissue)
1502	470	2502 235 Design issue fee
1503	630	2503 315 Plant issue fee
1460	130	1460 130 Petitions to the Commissioner
1807	50	1807 50 Processing fee under 37 CFR 1.17(q)
1806	180	1806 180 Submission of Information Disclosure Stmt
8021	40	8021 40 Recording each patent assignment per property (times number of properties)
1809	750	2809 375 Filing a submission after final rejection (37 CFR § 1.129(a))
1810	750	2810 375 For each additional invention to be examined (37 CFR § 1.129(b))
1801	750	2801 375 Request for Continued Examination (RCE)
1802	900	1802 900 Request for expedited examination of a design application
Other fee (specify)		
*Reduced by Basic Filing Fee Paid		SUBTOTAL (3) (\$ 130.00)

SUBMITTED BY					
Name (Print/Type)	Klaus Schweitzer	Registration No. (Attorney/Agent)	Limited Recognition	Telephone	(704) 365-4881
Signature	<i>K. Schweitzer</i>			Date	August 21, 2003

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